

Nonrefundable Filing Fee - \$50.00
Compliance Resolution Fund - \$10.00
Dishonored Check - \$15.00

STATE OF HAWAII
DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS
Business Registration Division
1 01 0 Richards Street
Mailing Address: P.O. Box 40, Honolulu, Hawaii 9681 0

Check one:

☐ new

☐ renewal

OFFICE USE ONLY

_____, S9

STATEMENT OF PROFESSIONAL FUND-RAISING COUNSEL
FOR A CHARITABLE ORGANIZATION

1. Name of professional fund-raising counsel: _____

2. Address: _____

3. Name under which business is conducted: _____

4. Names, residence and business addresses, social security numbers of all officers, partners, agents, servants, employees, directors and independent contractors:

<u>Name and</u> <u>Soc. Sec. #</u>	<u>Title</u>	<u>Residence</u> <u>Address</u>	<u>Business</u> <u>Address</u>

5. Length of time engaged in business as a professional fund-raising counsel: _____

_____ } ss.

_____ being duly sworn, deposes and
(officer name)

says that (he) (she) is the _____ of _____
(title) (organization name)

the professional fund-raising counsel named in the foregoing statement, and that the information provided made in the statement is true and correct to the best of (his) (her) knowledge and belief.

Signature

Subscribed and sworn to before me this _____
_____ day of _____, 19____

Notary Public, State of _____
My commission expires: _____

INSTRUCTIONS

- Type or print legibly in black ink. All signatures shall be in black ink.
- Be sure all information requested is complete and that you have filled in all the blanks. If there is not enough space, attachments will be accepted.
- The nonrefundable filing fee of \$50, plus the Compliance Resolution Fund fee of \$10 are payable to the Department of Commerce and Consumer Affairs. Submit one check for the total of \$60.
- There is a \$15 charge for all dishonored checks.

Note: The BOND FOR PROFESSIONAL FUND-RAISING COUNSEL OR PROFESSIONAL SOLICITOR OF A CHARITABLE ORGANIZATION shall be submitted with the statement.